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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.		MFCP.103969
	First Inventor		Jong HUANG
	Title	AUTOMATED IMAGE MARKUP SYSTEM AND METHOD	
	Express Mail Label No.		N/A

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> MAIL STOP Patent Application Commissioner for Patents P.O. Box 1450 Arlington, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original, and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure [Total Pages <input type="text" value="22"/> ]		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets <input type="text" value="5"/> ]		<b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (where there is an assignee) <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) Should be specifically itemized 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other _____	
5. Oath or Declaration [Total Pages <input type="text" value="2"/> ] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)			
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			

16591 U.S. PTO  
10/609388

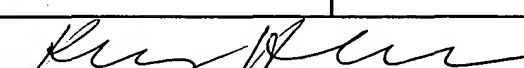
07/01/03

**18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:**☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

<b>19. CORRESPONDENCE ADDRESS</b>					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label			or <input type="checkbox"/> Correspondence address below		
					
05251					
PATENT TRADEMARK OFFICE					
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Name (Print/Type)	Kerry H. Owens	Registration No. (Attorney/Agent)	37,412
Signature		Date	July 1, 2003

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**FEE TRANSMITTAL  
FOR FY 2002**

Patent fees are subject to annual revision.

**C mplete if Known**

Application Number Not yet assigned

Filing Date On even date herewith

First Named Inventor Jong HUANG

Examiner Name

Group Art Unit

TOTAL AMOUNT OF PAYMENT

\$1,120.00

Attorney Docket No.

MFCP.103969

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number

19-2112

Deposit  
Account  
Name

Shook, Hardy &amp; Bacon LLP

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit Card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) \$750.00

**2. EXTRA CLAIM FEES**

	Total Claims	Extra Claims	Fee from below	Fee Paid
	29	-20** = 9	x \$18 =	\$162.00
Independent Claims	5	-3** = 2	x \$84 =	\$168.00

Multiple Dependent = \$0

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claims, if not paid	
1204	84	2204	42	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) \$330.00

\*\* or number previously paid, if greater; For reissues, see above.

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	139	130	Non-English specification	
1812	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	112	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
1251	110	215	55	Extension for reply within first month	
1252	410	216	200	Extension for reply within second month	
1253	930	217	460	Extension for reply within third month	
1254	1,450	218	720	Extension for reply within fourth month	
1255	1,970	228	980	Extension for reply within fifth month	
1401	320	219	160	Notice of Appeal	
1402	320	220	160	Filing a brief in support of an appeal	
1403	280	221	140	Request for oral hearing	
1451	1,510	138	1,510	Petition to institute a public use proceeding	
1452	110	240	55	Petition to revive - unavoidable	
1453	1,300	241	640	Petition to revive - unintentional	
1501	1,300	242	640	Utility issue fee (or reissue)	
1502	470	243	230	Design issue fee	
1503	630	244	310	Plant issue fee	
1460	130	122	130	Petitions of the Commissioner	
1807	50	123	50	Processing fee under 37 CFR 1.17(q)	
1806	180	126	180	Submission of Information Disclosure Statement	
8021	40	581	40	Recording each patent assignment per properties (times number of properties)	40.00
1809	750	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	279	370	Request for Continued Examination (RCE)	
1802	900	169	900	Request for expedited examination of a design application	

Other fee (specify)


\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

\$40.00

**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Kerry H. Owens	Registration No. (Attorney/Agent)	37,412	Telephone	(202) 783-8400
Signature				Date	July 1, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.